

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

RECEIVED

2014 JUL 16 AM 11:28

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

JAMES E. BRYAN FOR CONGRESS

ADDRESS (number and street)

8321 STOKES RD

Check if different
than previously
reported. (ACC)

LAUREL HILL

FL

32567-2004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C 00555201

3. IS THIS
REPORT

☒

NEW
(N)

OR

☐

AMENDED
(A)

FL

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☒

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

MM / DD / YYYY

in the
State of

FL

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

MM / DD / YYYY

in the
State of

FL

5. Covering Period

04 / 01 / 2014

through

06 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JAMES E. BRYAN

Signature of Treasurer

James E. Bryan

Date

07 / 10 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

James E. Bryan for Congress

Report Covering the Period:

From:

04 ' 01 ' 2014

To:

06 ' 30 ' 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	240000	658500
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	240000	658500
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1241000	12838.64
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1241000	12838.64
8. Cash on Hand at Close of Reporting Period (from Line 27)	100	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

James E. Bryan for Congress

Report Covering the Period:

From:

04' 01' 2014

To:

06' 30' 2014

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A)

(ii) Unitemized

(iii) TOTAL of contributions
from individuals

(b) Political Party Committees

(c) Other Political Committees
(such as PACs)

(d) The Candidate

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

950.00

850.00

600.00

2,400.00

3,160.00

2,625.00

800.00

6,585.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

13. LOANS:

(a) Made or Guaranteed by the
Candidate

(b) All Other Loans

(c) TOTAL LOANS
(add Lines 13(a) and (b))

2,479.59

2,479.59

6,254.59

6,254.59

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

15. OTHER RECEIPTS (Dividends, Interest, etc.)

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)

4,879.59

12,839.00

DETAILED SUMMARY PAGE of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

12,410.00

12,802.91

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate.....

(b) Of All Other Loans

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs)(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

21. OTHER DISBURSEMENTS.....

22. TOTAL DISBURSEMENTS

(add Lines 17, 18, 19(c), 20(d), and 21) ►

12,410.00

12,802.91

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

7,531.61

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

48,795.91

25. SUBTOTAL (add Line 23 and Line 24).....

12,411.20

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

12,410.00

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

1.20

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 5

☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 15
12 13a 13b 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

JAMES E. BRYAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Dewrell, Don

Mailing Address

1261-A North Eglin Pkwy

City

Shalimar

State

FL

Zip Code

32579

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

Self

Occupation

lawyer

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

, 250.00

Date of Receipt

05 02 2014

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Lewis, Jerome

Mailing Address

4671 Meadow Lake Dr

City

Crestview

State

FL

Zip Code

32539

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

, 200.00

Date of Receipt

04 21 2014

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Peek, Harold

Mailing Address

P.O. Box 36

City

Valparaiso

State

FL

Zip Code

32580

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

Self

Occupation

lawyer

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

, 750.00

Date of Receipt

04 04 2014

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 5

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

JAMES E. BRYAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Peek, Harold

Mailing Address

P.O. Box 36

City

Valparaiso

State

FL

Zip Code

32580

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

Self

Occupation

Lawyer

Receipt For:

☐ Primary

☒ General

☐ Other (specify)

Election Cycle-to-Date

1,000.00

Date of Receipt

06 01 2014

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

06 01 2014

Amount of Each Receipt this Period

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☒ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

06 01 2014

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

950.00

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

PAGE 3 OF 5

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

JAMES E. BRYAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. David M. Chesser

Mailing Address

122 Bayou Dr.

City Niceville

State FL

Zip Code

32578-2303

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

Self

Occupation

lawyer

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

10000

Date of Receipt

04 / 01 / 2014

Amount of Each Receipt this Period

10000

Full Name (Last, First, Middle Initial)

B. Willie Henry

Mailing Address

3707 Old California Rd.

City Laurel Hill

State FL

Zip Code

32567

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

04 / 02 / 2014

Amount of Each Receipt this Period

5000

Full Name (Last, First, Middle Initial)

C. Bettie Lehr

Mailing Address

21 Japonica Lane

City Shalimar

State FL

Zip Code

32579-1134

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

25000

Date of Receipt

04 / 02 / 2014

Amount of Each Receipt this Period

10000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

25000

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: **PAGE 4 OF 5**
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

JAMES E. BRYAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. **Business World**

Mailing Address

21 Racetrack Rd.

City

Ft. Walton Beach

State

FL

Zip Code

32547

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

Self

Occupation

Printer

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

100.00

Date of Receipt

05 02 2014

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. **Holland, Lynn**

Mailing Address

509 Oak Ave.

City

Niceville

State

FL

Zip Code

32588-0689

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

100.00

Date of Receipt

04 21 2014

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. **Kiehl, Darlo**

Mailing Address

1459 Catmar Rd

City

Niceville

State

FL

Zip Code

32578

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

Self

Occupation

Insurance agent

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

04 21 2014

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

250.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **5** OF **5**

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

JAMES E. BRYAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. **Lewis, Kit**

Mailing Address

88 - 4th St

City

Shalimar

State

FL

Zip Code

32579

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

, 150.00

Date of Receipt

04 04 2014

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. **Lynch, Chuck**

Mailing Address

524C Parkview Rd.

City

Ft. Walton Beach

State

FL

Zip Code

32547

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

, 100.00

Date of Receipt

04 04 2014

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. **Smith, Charles**

Mailing Address

23355 Fifth Ave.

City

Floral

State

AL

Zip Code

36442

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

Self

Occupation

pharmacist

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

, 100.00

Date of Receipt

04 05 2014

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

350.00

TOTAL This Period (last page this line number only).....

850.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE / OF

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

JAMES E. BRYAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Democratic Executive Committee of Okaloosa County

Mailing Address

P.O. Box 144

City Shalimar

State

FL

Zip Code

32579

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

n/a

Occupation

PAC

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

500.00

Date of Receipt

04 21 2014

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Act Blue

Mailing Address

366 Summer St.

City Sommerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C00555201

Name of Employer

n/a

Occupation

PAC

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

04 21 2014

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

Date of Receipt

04 21 2014

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 3

☒ 17 20a ☐ 18 20b ☐ 19a 20c ☐ 19b 21

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NAME OF COMMITTEE (In Full)

JAMES E. BRYAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Florida Dept. of State - Div. of Elections

Mailing Address

500 So. Bronough St.

City Tallahassee

State FL

Zip Code 32399

Purpose of Disbursement

Filing fee

Candidate Name

James E. Bryan for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: FL

District: 01

Full Name (Last, First, Middle Initial)

Date of Disbursement

04/14/2014

Amount of Each Disbursement this Period

1,044.00

B. Business World

Mailing Address

21 Racetrack Rd.

City Ft. Walton Beach

State FL

Zip Code 32547

Purpose of Disbursement

yard signs

Candidate Name

James E. Bryan for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: FL

District: 01

Full Name (Last, First, Middle Initial)

Date of Disbursement

04/15/2014

Amount of Each Disbursement this Period

459.00

C. Business World

Mailing Address

21 Racetrack Rd

City Ft. Walton Beach

State FL

Zip Code 32547

Purpose of Disbursement

Cards + yard signs

Candidate Name

James E. Bryan for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: FL

District: 01

Date of Disbursement

06/15/2014

Amount of Each Disbursement this Period

608.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1,157.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 3

☒ 17 20a ☐ 18 20b ☐ 19a 20c ☐ 19b 21

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NAME OF COMMITTEE (In Full)

James E. Bryan for Congress

Full Name (Last, First, Middle Initial)

A. James E. Bryan

Mailing Address

8321 Stokes Rd

City

Laurel Hill

State

FL

Zip Code

32567

Purpose of Disbursement

gas

Candidate Name

James E. Bryan for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: FL

District: 01

Date of Disbursement

06 30 2014

Amount of Each Disbursement this Period

431.00

Full Name (Last, First, Middle Initial)

B. James E. Bryan

Mailing Address

8321 Stokes Rd

City

Laurel Hill

State

FL

Zip Code

32567

Purpose of Disbursement

mileage

Candidate Name

James E. Bryan for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: FL

District: 01

Date of Disbursement

06 30 2014

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. James E. Bryan

Mailing Address

8321 Stokes Rd

City

Laurel Hill

State

FL

Zip Code

32567

Purpose of Disbursement

dry cleaning suits

Candidate Name

James E. Bryan for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: FL

District: 01

Date of Disbursement

06 02 2014

Amount of Each Disbursement this Period

22.50

SUBTOTAL of Disbursements This Page (optional).....

753.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 3 OF 3

☒ 17 20a ☐ 18 20b ☐ 19a 20c ☐ 19b 21

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NAME OF COMMITTEE (In Full)

James E. Bryan for Congress

Full Name (Last, First, Middle Initial)

A. James E. Bryan

Mailing Address

8321 Stokes Rd

City

Laurel Hill

State

FL

Zip Code

32567

Purpose of Disbursement

cell phone

Candidate Name

James E. Bryan for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: FL

District: 01

Date of Disbursement

05 12 2014

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. James E. Bryan

Mailing Address

8321 Stokes Rd

City

Laurel Hill

State

FL

Zip Code

32567

Purpose of Disbursement

food

Candidate Name

James E. Bryan for Congress

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify)

State: FL

District: 01

Date of Disbursement

06 30 2014

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

150.00

1241.00

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE OF

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

JAMES E. BRYAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

James E. Bryan

Mailing Address

8321 Stokes Rd.

City

Laurel Hill

State

FL

ZIP Code

32567-2004

Election:

☐ Primary

☒ General

☐ Other (specify) ▼

Original Amount of Loan

2,479.59

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2,479.59

TERMS

Date Incurred

04

02

2014

Date Due

12

01

2014

Interest Rate

0.00

% (apr)

Secured:

☐ Yes

☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:


SUBTOTALS This Period This Page (optional)..... ►

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

FEDERAL ELECTION COMMISSION
999 E. STREET
WASHINGTON, D.C. 20463

Federal Election Commission
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